

## **eStatements Application and Agreement**

Account Holder Name:	
Daytime Phone:	Evening Phone:
	Checking and Savings Account Number(s):
Highpoint Community eStatements. You will for completion of your COMPLETE APPLIC  Upon receipt of your of password, by electron username will be required.  eStatements System R  A personal of	email to complete application, Highpoint Community Bank will send you a ic email, to the working email provided by you. This password and your ired to access your eStatements.  equirements:
<ul><li>E-mail access</li><li>Internet Exp</li></ul>	SS .
Adobe Acro	
I hav	ve hardware and software that meets the above requirements
Highpoint Community eStatements occurs.	Bank will notify you if a change in the system requirements to access or retain
eStatements Application	<u>n:</u>
Agreement below and l	ee to the eStatements System Requirements and the eStatements Terms of would like to receive eStatement delivery. I understand that for the accounts listed ceive a periodic statement sent by U.S. mail.
Customer Signature:	Date:

## **eStatements Terms of Agreement:**

By accepting the terms of this Agreement, you hereby authorize Highpoint Community Bank to provide periodic account statements (eStatements) to you on a monthly or quarterly basis, as applicable, by electronic mail to a working email address provided by you instead of a printed statement via the U.S. mail. You further authorize Highpoint Community Bank to provide other required disclosures Highpoint Community Bank might send you with your account statement (for example, the Deposit Account Agreement, the Truth In Savings disclosure, the Schedule of Fees, the Electronic Funds Transfer disclosure, and the Privacy Policy or other written disclosures) and any and all notices Highpoint Community Bank might send you with or on your account statement (for example, changes to the Deposit Account Agreement, changes in services or fees, etc.) to you by electronic mail.

You agree to notify us promptly, in writing, of any change in your email address at least ten (10) days before the end of your normal statement cycle at Highpoint Community Bank, Electronic Banking Department, 150 W. Court St., Hastings, MI 49058. If your eStatement is returned as undeliverable, an attempt will be made to contact you. If contact cannot be made, your statement will be sent by U.S. mail to your current mailing address on record with Highpoint Community Bank and you will be removed from the eStatement service. Pursuant to this paragraph, if your eStatement is returned as undeliverable and you are removed from the eStatement service, a fee may apply as specified in the Truth in Savings Disclosure provided to you at account opening.

You will be required to use a password to view the eStatements. It is your sole responsibility to protect your password from unauthorized persons. You agree that it is your responsibility to ensure that the eStatements cannot be intercepted or viewed by others. You agree Highpoint Community Bank has no control as to the persons who have access to your personal computer and/or your password once it is in your possession. You understand that you have no expectation of privacy if the eStatements are transmitted to an email address owned by your employer. You further agree to release Highpoint Community Bank from any liability if the information is intercepted or viewed by unauthorized parties at your employer or other email address selected by you.

Your eStatement will be dated the day it is sent to you by email (the "email date") regardless of when you receive and/or open the statement. You must promptly review your eStatement and any accompanying items and notify us in writing at Highpoint Community Bank, Electronic Banking Department, 150 W. Court St., Hastings, MI 49058 (within the applicable time periods specified in your Deposit Account Agreement) of any problem, such as forgery, unauthorized signature or debit, alteration, encoding error, or other irregularity.

You have the right to obtain a paper copy of any eStatement. To obtain a paper copy, you must make a specific request in writing to Highpoint Community Bank, Electronic Banking Department, 150 W. Court St., Hastings, MI 49058. In some cases, research fees specified in Highpoint Community Bank's Schedule of Fees may apply to your request pursuant to this paragraph.

You have the right to withdraw your consent to receive eStatements at any time. To withdraw your consent, you must notify us via email through our website at www.hastingscitybank.com, or in writing to Highpoint Community Bank, Electronic Banking Department, 150 W. Court St., Hastings, MI 49058. The withdrawal of your consent should be received at least ten (10) days before the end of your normal statement cycle. Upon receipt of your withdrawal, all subsequent account statements will be sent by U.S. mail to your current mailing address on record with Highpoint Community Bank. Pursuant to this paragraph, if you withdraw your consent to receive eStatements at any time, a fee may apply as specified in the Truth in Savings Disclosure provided to you at account opening.